

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S. Z		11-30-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T. A	844	01/30/02
RESPONSE FORMALITY REVIEW	B. Z	847	01-26-02
	*	72886	07-05-02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1		✓	
2		✓	
3		✓	
4		✓	
5		✓	
6		✓	
7		✓	
8		✓	
9		✓	
10		✓	
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45		✓	
46		✓	
47		✓	
48		✓	
49		✓	
50		✓	

Claim	Final	Original	Date
51		✓	
52		✓	
53		✓	
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57		✓	
58		✓	
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99		✓	
100		✓	

Claim	Final	Original	Date
101		✓	
102		✓	
103		✓	
104		✓	
105		✓	
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107		✓	
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146		✓	
147		✓	
148		✓	
149		✓	
150		✓	

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)